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Substitute for form 1449/PTO INFORMATION DISCLOSURE				С	Complete if Known		
				Application Number	10/518,490		
STATEMENT BY APPLICANT			PLICANT	Filing Date	6/23/2003		
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Sheet	1	of	1	Attorney Docket Number	016906-0361		

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Cite	Document Number	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
No.1	Number-Kind Code ² (if known)	MM-DD-YYYY				
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/LC/	A3	DE 197 51 652 A1	05-27-1999	BEHR GMBH & CO		ABS	

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ⁶		

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